

RULEMAKING NOTICE FORM

Notice Number 2015-95Rule Number He-W 548

1. Agency Name & Address:

**NH Dept. of Health & Human Services
Office of Medicaid Business and Policy
129 Pleasant Street
Concord, NH 03301**

2. RSA Authority:

RSA 161:4-a, X

3. Federal Authority: _____

4. Type of Action:

Adoption _____

Amendment _____

Repeal _____

Readoption **X**Readoption w/amendment **X**5. Short Title: **Extended Services to Pregnant Women**

6. (a) Summary of what the rule says and of any proposed amendments:

He-W 548 permits the department to provide to New Hampshire Medicaid eligible pregnant and postpartum women an expanded package of services geared towards improving birth outcomes and parenting skills and ensuring the health and well-being of the child. Services include instruction about the course of pregnancy, delivery, and child care; social services; care coordination; education on infant health and development; nutritional and service counseling; and home visits.

Only minor changes to the rule are being proposed in order to update terminology and make the language consistent with other Medicaid service rules. No changes in Medicaid policy are being proposed.

Most of this rule is due to expire on June 25, 2015, subject to extension pursuant to RSA 541-A:14-a.

6. (b) Brief description of the groups affected:

This rule affects pregnant and postpartum NH Medicaid eligible women who receive these services under the fee for service platform and the community agencies which are under contract with the Department's Maternal and Child Health Section.

6. (c) Specific section or sections of state statute or federal statute or regulation which the rule is intended to implement:

Rule	Federal Reg./RSA
He-W 548.01	42 CFR 440.250(p)
He-W 548.02	42 CFR 440.210, 42 CFR 440.220, 42 CFR 440.225, 42 CFR 40.250(p)
He-W 548.03	42 CFR 440.50, 42 CFR 440.60(a), 42 CFR 440.70, 42 CFR 440.90, 42 CFR 440.130, 42 CFR 440.165, 42 CFR 440.166
He-W 548.04	42 CFR 440.250(p), 42 CFR 440.210(a)(2)
He-W 548.05	42 CFR 440.250(p)
He-W 548.06	42 CFR 440.250(p)
He-W 548.07	42 CFR 456.3
He-W 548.08	42 CFR 433.139
He-W 548.09	42 CFR 447; RSA 161:4, VI(a)

7. Contact person for copies and questions including requests to accommodate persons with disabilities:

Name: **Michael Holt** Title: **Rules Coordinator**
Address: **Dept. of Health and Human Services** Phone #: **271-9234**
Administrative Rules Unit Fax#: **271-5590**
129 Pleasant St. E-mail: michael.holt@dhhs.state.nh.us
Concord, NH 03301

TTY/TDD Access: Relay NH 1-800-735-2964 or dial 711 (in NH)

The proposed rules may be viewed and downloaded at:
<http://www.dhhs.nh.gov/oos/aru/comment.htm>

8. Deadline for submission of materials in writing or, if practicable for the agency, in the electronic format specified: **Tuesday, July 14, 2015**

☒ Fax ☒ E-mail ☐ Other format (specify):

9. Public hearing scheduled for:

Date and Time: **Tuesday, July 7, 2015 at 2:00 PM**

Place: [**DHHS Brown Bldg., Auditorium, 129 Pleasant St., Concord, NH**](#)

10. Fiscal Impact Statement (Prepared by Legislative Budget Assistant)

FIS # **15:098**, dated **06/04/15**

- 1. Comparison of the costs of the proposed rule(s) to the existing rule(s):**

There is no difference in cost when comparing the proposed rules to the existing rules.

- 2. Cite the Federal mandate. Identify the impact of state funds:**

No federal mandate, no impact on state funds.

- 3. Cost and benefits of the proposed rule(s):**

- A. To State general or State special funds:**

None.

- B. To State citizens and political subdivisions:**

None.

- C. To Independently owned businesses:**

None.

11. Statement Relative to Part I, Article 28-a of the N.H. Constitution:

The proposed rule modifies an existing program or responsibility, but does not mandate any fees, duties or expenditures on the political subdivisions of the state, and therefore does not violate Part I, Article 28-a of the N.H. Constitution.

CHAPTER He-W 500 MEDICAL ASSISTANCE

PART He-W 548 EXTENDED SERVICES TO PREGNANT WOMEN

Readopt He-W 548.01, effective 6/25/2007 (Document #8904), as amended effective 7/1/12 (Document # 10139), to read as follows:

He-W 548.01 Definitions.

- (a) “Department” means the New Hampshire department of health and human services.
- (b) “Extended services” means services rendered to pregnant and postpartum women in addition to routine medical prenatal and postpartum care with the purpose of improving birth outcomes and parenting skills.
- (c) “Medicaid” means the Title XIX and Title XXI programs administered by the department, which makes medical assistance available to eligible individuals.
- (d) “Postpartum period” means the period that begins on the last day of pregnancy and extends through the end of the month in which the 60-day period following termination of pregnancy ends.
- (e) “Recipient” means any individual who is eligible for and receiving medical assistance under the medicaid program.
- (f) “Title XIX” means the joint federal-state program described in Title XIX of the Social Security Act and administered in New Hampshire by the department under the medicaid program.
- (g) “Title XXI” means the joint federal-state program described in Title XXI of the Social Security Act and administered in New Hampshire by the department under the medicaid program.

Readopt with amendment He-W 548.02 and He-W 548.03, effective 6/25/2007 (Document #8904), to read as follows:

He-W 548.02 Recipient Eligibility. All ~~Title XIX-medicaid~~ recipients shall be eligible for extended services during pregnancy and through the end of the month in which the 60th postpartum day falls.

He-W 548.03 Provider Participation. All providers of extended services shall:

- (a) Be under current contract obligation with the maternal and child health section, division of public health services as a prenatal program or as a primary care agency providing prenatal care; and
- (b) Be a NH enrolled ~~Title XIX-medicaid~~ provider.

Readopt He-W 548.04, effective 6/25/2007 (Document #8904), to read as follows:

He-W 548.04 Covered Services. The following services shall be covered, rendered singularly or in any combination during a calendar month, and in accordance with the recipient’s plan of care:

- (a) Social services including:

- (1) An initial assessment;
 - (2) Assisting the recipient in identifying her ongoing needs and referring her to appropriate services; and
 - (3) Home visits;
- (b) Care coordination between a recipient and any other individuals or agencies involved in the recipient's care, including:
- (1) Communicating outcomes or status to appropriate providers;
 - (2) Providing liaison assistance during the transition process to ongoing health, mental health, or social services;
 - (3) Assisting with arrangements for transportation, childcare, or community services;
 - (4) Making referrals to other agencies, programs, and community services, including the federal special supplemental food program for women, infants and children;
 - (5) Follow-up to ensure the delivery of necessary services, including tracking missed appointments, rescheduling, and the identification and resolution of care barriers; and
 - (6) Intra-agency consultations concerning the recipient's care needs;
- (c) Individual or group education including:
- (1) Education about the health implications of risk behavior, such as smoking, and use of alcohol and other drugs;
 - (2) Education about infant health, mental health, and development, including positive parenting and its role in infant and child development; and
 - (3) Individual instruction about the course of pregnancy, delivery and child care; and
- (d) Nutritional services including:
- (a) An initial assessment of the recipient's current nutritional status;
 - (b) Nutritional counseling; and
 - (c) Assisting the recipient in identifying her ongoing needs and appropriate services.

Readopt with amendment He-W 548.05 through 548.09, effective 6/25/2007 (Document #8904), to read as follows:

He-W 548.05 Non-Covered Services. Any other medical services that are covered under the NH ~~Title XIX-medicaid~~ program, pursuant to He-W 522 through 577 or He-M 426 through 701 shall not be covered as part of extended services to pregnant women.

He-W 548.06 Required Documentation. The provider shall maintain the following documentation for all extended services care provided:

(a) A plan of care containing:

(1) The initial assessment, which shall contain:

- a. The recipient's name and ~~medical assistance~~ medicaid identification number;
- b. The date of entry into clinic service;
- c. The number of weeks of gestation at the date of entry;
- d. The recipient's medical, nutritional, and social needs and risks;
- e. A listing of services and types of providers to be used, to address the recipient's needs and risks, as well as the frequency of services;
- f. A dated signature on the plan of care by the physician or advanced practice registered nurse ~~practitioner~~, along with the signature of the recipient, approving the plan of care;
- g. A statement signed by the recipient which gives the agency staff permission to discuss the recipient's needs with other medical and social service caregivers; and
- h. The date of, and reason for, discharge from the program;

(2) Ongoing plan of care notes, relating to the original plan of care, containing:

- a. Date(s) of service(s); and
- b. Description of service(s); and

(3) Changes to the original plan of care described in (1)d. and (1)e. above, to be attached to the original plan of care;

(b) Attendance records for any group education attended by a recipient; and

(c) An extended services summary sheet listing the recipient's name and ~~medical assistance~~ medicaid identification number, and the date(s) and type(s) of extended service(s) rendered.

He-W 548.07 Utilization Review and Control. The department's provider integrity unit shall monitor utilization of extended services to pregnant women to identify, prevent, and correct potential occurrences of fraud, waste, and abuse, in accordance with 42 CFR 455 ~~and~~ 42 CFR 456, and He-W 520.

He-W 548.08 Third Party Liability. All third party obligations shall be exhausted before ~~claims shall be submitted to the department's fiscal agent~~ the medicaid program is billed, in accordance with 42 CFR 433.139.

He-W 548.09 Payment for Services. Payment for extended services to pregnant women shall be made as follows:

(a) Rates of payment shall be at a monthly rate established by the department in accordance with RSA 161:4, VI(a);

(b) At least one of the services described in He-W 548.04 shall be provided each month, in order for the monthly rate to be billed by the provider;

(c) The provider shall submit claims for payment to the department's fiscal agent; and

(d) The provider shall maintain supporting records, in accordance with He-W 520 and He-W 548.06.

APPENDIX B

RULE	STATE OR FEDERAL LAW THE RULE IMPLEMENTS
He-W 548.01	42 CFR 440.250(p)
He-W 548.02	42 CFR 440.210, 42 CFR 440.220, 42 CFR 440.225, 42 CFR 40.250(p)
He-W 548.03	42 CFR 440.50, 42 CFR 440.60(a), 42 CFR 440.70, 42 CFR 440.90, 42 CFR 440.130, 42 CFR 440.165, 42 CFR 440.166
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